PART B - FEE(S) TRANSMITTAL

JAN 0	6 2005		or <u>F</u>	Commissioner to P.O. Box 1450 Alexandria, Virg Eax (703) 746-4000	or Patents ginia 22313-1450		
INSTRUCTIONS. Lis for appropriate. All furne docindicated unless corrected by maintenance fee notification	m skilled be used for tran respondence including the below or directed otherwise is.	smitting the ISSU Patent, advance or in Block 1, by (a	E FEE and F ders and notif) specifying a	PUBLICATION FEE (if requirements of maintenance fees to new correspondence address	ired). Blocks 1 through 5 will be mailed to the curren ; and/or (b) indicating a sep	should be completed where t correspondence address a parate "FEE ADDRESS" fo	
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KENYON & KENYON ONE BROADWAY NEW YORK, NY 10004				Ce I hereby certify that to States Postal Service addressed to the Ma transmitted to the US	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelop addressed to the Mail Stop ASSUE FEE address above, or being facsimilar transmitted to the USPTO (703) 746-4000, on the date indicated below.		
01/07/2005 MBEYENE2 00	0000191 110600 10666	968	Azarron C.		(Depositor's name)		
02 FC:1504 300.	00 DA 00 DA 00 DA				1/4/20	(Signature)	
APPLICATION NO.	FILING DATE	G DATE FIRST NA		INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/666,968	09/17/2003	<u></u>	Frank T	. Hady	02207/797902	8602	
TITLE OF INVENTION: A IDENTIFYING A LOGIC E			OR COUNTIN	IG LOGIC EVENTS, DETE	RMINING LOGIC EVENT	HISTOGRAMS AND FOR	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$ 1366 1400		\$300	\$\t6\text{\$0} 1700	01/05/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS			
SUAREZ, FELIX E		2857	2857				
"Fee Address" indicated PTO/SB/47; Rev 03-02 of Number is required.	lence address (or Change of 22) attached. ion (or "Fee Address" Indica or more recent) attached. Us	Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND				(print or type) ear on the patent. If an assign	nee is identified below, the	document has been filed fo	
recordation as set forth in	37 CFR 3.11. Completion	of this form is NO	Γ a substitute i	for filing an assignment.			
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Intel Corpor	ation		Santa C	lara, CA			
Please check the appropriate	assignee category or catego	ries (will not be pr	inted on the pa	atent) : 🔲 Individual 🖾 C	orporation or other private g	roup entity 🚨 Governmen	
4a. The following fee(s) are enclosed: 4b. Pay				` '	11		
Issue Fee Solution Fee (No. s	mall entity discount permitte	ed)	A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of	• •		The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 11-0600 (enclose an extra copy of this form).				
5. Change in Entity Status							
•••	MALL ENTITY sectus. See is requested to apply the Issublication Fee (if required)			ant is no longer claiming SMA y) or to re-apply any previous other than the applicant; a reg			
interest as snown by the reco	ords of the Office States Pat	- rademark	Office.		. / . /		
Authorized Signature				Date	1/4/2005		
Typed or printed name			<u></u> _		1 No. 33,865		
This collection of informatic an application. Confidential	on is required by 37 CFR 1.3	11. The informatio	on is required t	o obtain or retain a benefit by lection is estimated to take 12	the public which is to file (a minutes to complete, includ	nd by the USPTO to process ing gathering, preparing, and	

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